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## BIB DATA SHEET

CONFIRMATION NO. 3785

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/688,267	10/17/2003	382	2624	955-41		
<b>RULE</b>						
<b>APPLICANTS</b> Anthony P. Reeves, Ithaca, NY; David Yankelevitz, Brooklyn, NY; Claudia Henschke, New York, NY; Antoni Chan, San Diego, CA;						
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/419,597 10/18/2002 Yes, A.W.						
<b>** FOREIGN APPLICATIONS *****</b>						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> None, A.W. 01/29/2004						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b>	<b>SHEETS DRAWINGS</b>	<b>TOTAL CLAIMS</b>	<b>INDEPENDENT CLAIMS</b>
Verified and /AKLILU K WOLDEMARIAM/ Acknowledged Examiner's Signature		Initials	NY	20	99	7
<b>ADDRESS</b>						
HOFFMANN & BARON, LLP 6900 JERICHO TURNPIKE SYOSSET, NY 11791 UNITED STATES						
<b>TITLE</b>						
System, method and apparatus for small pulmonary nodule computer aided diagnosis from computed tomography scans						
<b>FILING FEE RECEIVED</b> 2666	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		